STATE OF HAWAII

NOTICE OF AND REQUEST FOR EXEMPTION FROM CHAPTER 103F, HRS

To: Chief Procurement Officer

From: Department of Health, Adult Mental Health Division

Department/Division/Branch or Office

Pursuant to § 103F-101(a)(4), HRS, and Chapter 3-141, HAR, the Department requests a procurement exemption to purchase the following:

1. Title and description of health and human service(s):

Provision of a supervised, structured day program including center and community-based recreational activities for a brain injured individual. The day program services include all activity supplies, admission fees, lunch, snacks, and transportation.

2. Provider Name and Address: Special Education Center of Hawaii (SECOH)

708 Palekaua Street Honolulu, HI 96816

3. Total Contract Funds: \$80,000 (estimated)

Contract Funds per Year (if applicable): Year 1: \$40,000 Year 2: \$40,000

4. Reference number of Previous Request for this Service (if applicable):

PEH No. 13-12

5. Term of Contract: Start: 11/01/14

End: 10/31/16

6. Describe how procurement by competitive means is either not practicable or not advantageous to the State:

Procurement by competitive means is not practical because the provider is the only organization that the individual's case manager has been able to identify who is willing and capable of providing services to the individual. As a result of a 2008 settlement agreement entered into in the United States District Court, although the Adult Mental Health Division (AMHD) disputes the individual's eligibility for AMHD services, AMHD has agreed to provide this individual with E-ARCH housing and adult day program services as long as the individual is capable of receiving such services.

The provider is currently providing the adult day program services under previously approved request for exemption, PEH No. 13-12. Since entering the provider's program on November 1, 2008, the individual has been able to attend the program on a regular basis. The individual's brain injury is compounded by mental illness. Clinical continuity of care is crucial in the continued progress of this individual. The staff of SECOH has the knowledge and experience to work with this individual and is familiar with her routine. SECOH is able to provide therapeutic interventions, RN-case management, wellness and lifestyle coaching in individual and group settings, and can provide one-to-one support, as needed. SECOH is also able to provide transportation to and from the individual's residence, which is required as the individual is unable to drive or to utilize public transportation.

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7. Describe the reason for the selection of the provider including a description of how the procedure ensured the maximum fair and open competition practicable:

The individual's case manager and AMHD staff have searched for adult day programs that are willing and able to provide services to a brain injured individual. Goodwill Industries provided services to the individual for two months, but finally acknowledged that their staff lacked the experience and confidence in working with individuals with a brain injury. After leaving Goodwill, the individual's case manager took approximately five months to find another adult day program, SECOH, which would accept a brain injured individual. During these five months, the individual did not receive any day program services.

Unfortunately, no new providers have been identified who are capable and willing to provide the required adult day program service. Goodwill Industries continues to provide services for adults with developmental disabilities/mental retardation, but does not have the expertise to work with adults with brain injuries and mental illness. The Rehabilitation Hospital of the Pacific (RHP) has an inpatient brain injury program that provides 24-hour nursing care, which transitions the patient to a Community Re-Integration Program, where the patient will transition to a home environment. The RHP does not have a day program, does not provide transportation to their outpatient centers, nor do they address patients with mental ilness.

In February 2012, the Department of Health created the Brain Injury Resource Center in Hawaii (BIRC). Unfortunately, the BIRC's services are limited to support and therapy. The Brain Injury Association of Hawaii (BIAH) provides resources, case review or legal counsel. The BIRC and the BIAH do not offer half or full day programming, does not provide transportation, nor do they address individuals with mental illness, which is required by our consumer.

8. Describe the state agency's internal controls and approval requirements for the exempted procurement:

Service and administrative requirements under the contract shall be monitored through AMHD's regular oversight and monitoring procedures.

9. List the state agency personnel, by position title, who will be involved in the approval process and administration of the contract:

Amy Yamaguchi, AMHD Public Health Administrative Officer (PHAO) Enid Kagesa, AMHD Contracts Coordinator

10. Direct questions to (name & position):

Phone number:

Amy Yamaguchi, PHAO

808-586-4681

e-mail address:

amy.yamaguchi@doh.hawaii.gov

I certify that the information provided above is to the best of my knowledge true and correct.

Department Head Signature

Linda Rosen, M.D., M.P.H.

Typed Name

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NOTICE

The chief procurement officer is considering this request for exemption and, if there is good cause, the state intends to exempt the purchase as described in the request. Any inquiries regarding the purchase shall be directed to the contact person noted in item 10 of the request. Any concerns regarding the exemption shall be in writing and received by the chief procurement officer within seven days of the date the notice was first posted. Concerns shall be mailed to:

Chief Procurement Officer, State Procurement Office, 1151 Punchbowl St., #230A, Honolulu, HI 96813.

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| Chief Procurement Officer's Comments: | |
| This approval is for the procurement process only. Service providers are required to be compliant with applicable laws, and verified on the Hawaii Compliance Express, if applicable. This award is required to be posted on the Awards Reporting System. | |
| If there are any questions, please contact Corinne Higa at 587-4706, or Corinne.y.higa@hawaii.gov. | |
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| Chap Procurement Officer Signature | Date |

Please ensure adherence to applicable administrative requirements.